Crews Recreation Center

Adult Men's Basketball League - Waiver, Release of Liability & Consent Form

Home Phone: Mobile Phone: Mobile Phone: Hardress: Mobile Phone: Mobile P	Address:		
**I, the undersigned, player, acknowledge, agree and understand that: **I understand that there are certain risks of damages and injuries, including death, inherent in the practice and play of basketball, as well as in traveling in other related activities incidental to me, and I am willing to assume these risks. These risks include but are not limited to those hazards associated with weather conditions, travel, playing conditions, equipment and other participants. **I understand that the very nature of the game of basketball is hazardous and risky, including but not limited to, the acts of running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. **I certify that I am physically lift, have sufficiently trained for participation in this event, and have not been advised otherwise by a qualified medical person. **Further, I agree that in consideration for the right to allow me as a member of the league designated below and in consideration for permission to play at the sites arranged for by the team or league: 1. I do voluntarily elect to accept and solely assume all risks of injury incurred or suffered (a) while practicing or playing as a member of the league so designated, (b) while serving in a non-playing capacity as a team member or observer during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and the courts arranged for by my team or league for practice or play. 2. In addition to giving my full consent for participation, I do hereby waive, release, discharge and agree not to sue the league designated below, the owner or operator of any sites or other entity designated below, the owner or operator of any sites or other entity designated below, the my participation from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released. **Il hereby certi	Street	City	Zip Code
**I, the undersigned, player, acknowledge, agree and understand that: **I understand that there are certain risks of damages and injuries, including death, inherent in the practice and play of basketball, as well as in traveling in other related activities incidental to me, and I am willing to assume these risks. These risks include but are not limited to those hazards associated with weather conditions, travel, playing conditions, equipment and other participants. **I understand that the very nature of the game of basketball is hazardous and risky, including but not limited to, the acts of running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. **I certify that I am physically fit, have sufficiently trained for participation in this event, and have not been advised otherwise by a qualified medical person. **Further, I agree that in consideration for the right to allow me as a member of the league designated below and in consideration for permission to play at the sites arranged for by the team or league: 1. I do voluntarily elect to accept and solely assume all risks of injury incurred or suffered (a) while practicing or playing as a member of the league of designated, (b) while serving in a non-playing capacity as a team member or observer during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and the courts arranged for by my team or league for practice or play. 2. In addition to giving my full consent for participation, I do hereby waive, release, discharge and agree not to sue the league designated below, the owner or operator of any sites or other entity designated below, Town of Matthews, its Parks, Recreation and Cultural Resources Department and elected officials, employees and volunteers or any person or entity connected with the league for any claim, damages, costs including attorney fees, or cause of action	Home Phone:	Mobile Phone:	
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Date

Signature